Today's date:	Juror Number:
JUROR QUESTION	NNAIRE
Age: Race: Caucasian/White	African-American/Black
Asian Native American	
Residence. Do you: Own your home Rent your ho	
<del></del>	
How long have you lived at your present address?	· · · · · · · · · · · · · · · · · · ·
Work. Current: Where employed:	
Retired: From where:	
I have never been employed	
Not currently employed. Last job:	Title:
Full time/part time student	
Second/part time job Where:	Title:
Education. Please check highest level of education achieved	
Grade School/High School (Highest grade achi	leved:)
Graduated High School	
Cohool Attended	Degree:
Some College School Attended	Degree
Some College School Attended Graduated College School Attended	
Graduated College School Attended	
Graduated College School Attended	Degree: Degree:
Graduated College School Attended Post Graduate School Attended	Degree: Degree: dication or undergoing any medical treatment the
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any medical	Degree: Degree: dication or undergoing any medical treatment the ed this box, please describe the condition or list the
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any med could interfere with your jury service.  If you checke	Degree: Degree: dication or undergoing any medical treatment the ed this box, please describe the condition or list the
Graduated College School Attended Post Graduate School Attended Medical condition. Please check if you are taking any medical could interfere with your jury service.  If you checke medication:  Current Marital Status.  Single/Never Married.	Degree: Degree: dication or undergoing any medical treatment the ed this box, please describe the condition or list the
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any medical could interfere with your jury service.  If you checke medication:  Current Marital Status.  Single/Never Married.	Degree: Degree: dication or undergoing any medical treatment the ed this box, please describe the condition or list the c
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any med could interfere with your jury service. If you checke medication:  Current Marital Status. Single/Never Married.  Married. Years married.	Degree:
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any med could interfere with your jury service. If you checke medication:  Current Marital Status. Single/Never Married.  Married. Years married Widowed. Years wid	Degree:
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any med could interfere with your jury service.  If you checke medication:  Current Marital Status.  Single/Never Married.  Married. Years married  Widowed. Years wid  Divorced. Years div.  Separated. Years sep	Degree:
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any med could interfere with your jury service.  If you checke medication:  Current Marital Status.  Single/Never Married.  Married. Years married  Widowed. Years wid  Divorced. Years div.  Separated. Years sep	Degree:
Graduated College School Attended Post Graduate School Attended Medical condition. Please check if you are taking any medication:  Current Marital Status.  Single/Never Married. Married. Years married Widowed. Years wid Divorced. Years div Separated. Years sep  Spouse's employment.  Current: Where employed:	Degree:
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any med could interfere with your jury service.  If you checke medication:  Current Marital Status.  Single/Never Married.  Married. Years married.  Widowed. Years wide Divorced. Years divorced. Years sep Spouse's employment.	Degree:
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any med could interfere with your jury service.  If you checke medication:  Current Marital Status.  Single/Never Married.  Married. Years married  Widowed. Years wid  Divorced. Years div  Separated. Years sep  Spouse's employment.  Current: Where employed:  Retired: From where:	Degree: Degree
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any medication.  Current Marital Status.  Single/Never Married. Married. Years married. Widowed. Years wide Divorced. Years divorced. Years sep  Spouse's employment.  Current: Where employed:  Retired: From where: Has never been employed	Degree: Degree
Graduated College School Attended Post Graduate School Attended  Medical condition. Please check if you are taking any medication:  Current Marital Status.  Single/Never Married.  Married. Years married Widowed. Years wide Divorced. Years div Separated. Years sep  Spouse's employment.  Current: Where employed: Retired: From where: Has never been employed. Last job: Full time/part time student	Degree: Degree: Degree: dication or undergoing any medical treatment the ed this box, please describe the condition or list the list of th
Graduated College School Attended Post Graduate School Attended Medical condition. Please check if you are taking any medication:  Current Marital Status.  Graduate School Attended  Medical condition. Please check if you are taking any medication are taking any medication:  Graduated College School Attended  Medical condition.  If you checke medication:  Married. Years Married.  Widowed. Years wide provided of the provided of	Degree: Degree: Degree: dication or undergoing any medical treatment the ed this box, please describe the condition or list the list of th

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Hobbies/Interests.	Please list your top thre	ee:				
	Never served.				Length of ser	vice:
	Job description	ption Type				
lury service/trial e	xperience. Please che				<del>-</del>	
☐ Serve	ed on a grand jury. Whe	en?				,
Serve	ed on a jury trial. Please	answer the que	stions t	elow.		
When	n? Where?		] Civil	Criminal	Verdict/outcome:	
Wher	n?Where?		- ] Civil	Criminal	Verdict/outcome:	· <del></del> ,
	n?:Where?		_			
_	ed as a foreperson of a j		-			
☐ Testif	ied as a witness. When	?				
ieneral.	·					
Which television	n shows do you watch th	ne most?		· · · · · · · · · · · · · · · · · · ·		
Which magazin	es/newspapers do you r	ead regularly? _	· · · · · · · · · · · · · · · · · · ·			
Are there bump	er stickers on your vehic	de?			☐ No	☐ Yes
If yes, what	do they say?				· · · · · · · · · · · · · · · · · · ·	
Do you attend o	hurch, synagogue, or ot	her religious faci	ility at le	east once a m	onth? 🔲 No	Yes
If ves. wher	e do you attend?					
-	to any civic, social, victin			•	☐ No	Yes
If was to wh	nich organizations do you	u bolong?	_			
-	se family member, or a			ne victim of a	crime?□ No	☐Yes
•	•				<u>С</u>	
	se describe:se family member, or a c				consisted of a crim	
	Se ramily member, or a c ☐Yes If yes, please de					
- ·	vehicles insured? No	<del></del>		isurance cam		
nave you or a c	lose family member eve	r nied a lawsuit?			☐ No	☐ Yes
If yes, pleas	se describe:	<u> </u>				
Have you or a c	lose family member eve	r been sued?			☐ No	☐ Yes
If yes, pleas	se describe:					
	worked in a law enforcer				☐ No	☐ Yes
	se describe:			,	· <del>—</del>	
- '	·		<del> </del>		□No	☐ Yes
nave you done	any volunteer or social v	work <i>(</i>			LJ 140	ריי והצ
If yes, pleas	se describe:					
Is there any rea	son you feel you should	not serve on a ju	ury?		☐ No	☐ Yes
If ves. pleas	se describe:					
	v assistance filling out t				□ No	Yes